



# Commercial Saltwater License Application

South Carolina Department of Natural Resources  
License Office

PO Box 12559 Charleston, SC 29422-2559

(843)953-9031 OR (843)953-9033

This license is valid 7/1/06-6/30/07

**DNR**

For Office Use:

License(s):

**A**

## Applicant's Information

SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DL # \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone Home (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fisherman# \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex M F Race \_\_\_\_\_

Vessel Registration/Documentation Number \_\_\_\_\_ Vessel Master Y N

**B**

Commercial Saltwater License Resident \$25

Non-Resident \$300

TOTAL \$ \_\_\_\_\_

\*Only one license is required per license year. \*

**C**

## Commercial Equipment Licenses:

Gill Net Resident \$10 per 100ft Non-Resident \$50 per 100ft \_\_\_\_\_ ft TOTAL \$ \_\_\_\_\_

Minnow Traps Resident \$10 Non-Resident \$50 TOTAL \$ \_\_\_\_\_

Haul Seine Net(s) Resident \$10 per 100yds Non-Resident \$50 per 100yds \_\_\_\_\_ yds TOTAL \$ \_\_\_\_\_

Trotlines Resident \$10 Non-Resident \$50 TOTAL \$ \_\_\_\_\_

Other Equipment Resident \$10 Non-Resident \$50 TOTAL \$ \_\_\_\_\_

\* License required for each\* [ ] Hook & Line [ ] Gig [ ] Cast Net

**D**

## Shellfish Harvesting and Equipment Licenses:

Shellfish License

Resident \$75

Non-Resident \$375

TOTAL \$ \_\_\_\_\_

Handheld Equipment

No Cost

**E**

Crab Traps \_\_\_\_\_ # of Traps \_\_\_\_\_ Trap ID# \_\_\_\_\_

SC Residents: \$25 for 1<sup>st</sup> 50 traps – each additional trap is \$1

Nonresidents: \$125 for 1<sup>st</sup> 50 traps – each additional trap is \$5

TOTAL \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

**F**

Trawler License

Resident \$125

Non-Resident \$300

TOTAL \$ \_\_\_\_\_

\*Trawler Master must be at least 16 yrs of age\*

Owner's Name \_\_\_\_\_ Owner's SSN \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Vessel Registration # \_\_\_\_\_ Length \_\_\_\_\_ Vessel Name \_\_\_\_\_

Vessel Master's Name \_\_\_\_\_ Vessel Master's SSN \_\_\_\_\_

I understand that persons whose privileges are suspended are not eligible to apply for, hold, or use SCDNR licenses, permits, or tags. Nonresidents must pay by cashiers check, money orders, or cash. No out of state checks accepted. NO REFUNDS.

Signature \_\_\_\_\_ Date \_\_\_\_\_

The South Carolina Department of Natural Resources prohibits discrimination on the basis of race, color, gender, national origin, disability, religion or age. Direct all inquiries to the Office of Human Resources, PO Box 167, Columbia, SC 29202.